Part A — WORK SCHEDULE

CHECK ITEM TI	Is "Worked" (code 170) marked on the ISS?	**8000** 1 ☐ Yes — *Read Statement A* 2 ☐ No — *SKIP to Check Item T2, page 48*

STATEMENT A ➤ **You said . . . worked during** *(Read reference period months).* **These next few questions ask about . . .'s work schedule during a typical week that . . . worked during that 4 month period.**

1a. How many employers did . . . work for during a typical week?
(Count self-employed as one employer.)

8002 1 ☐ 1
2 ☐ 2
3 ☐ 3 +

If two or more employers, ask items 1b—h for the first job, then repeat for the second job.	JOB 1	JOB 2
b. How many hours per day did . . . work that week?	**8004** ☐☐.☐ Hours	**8006** ☐☐.☐ Hours
c. How many days did . . . work during that week?	**8008** ☐ Days	**8010** ☐ Days
d. Which days of the week were these? *Mark (X) all that apply.*	**8012** x5 ☐ All days **8016** 1 ☐ Sunday **8020** 2 ☐ Monday **8024** 3 ☐ Tuesday **8028** 4 ☐ Wednesday **8032** 5 ☐ Thursday **8036** 6 ☐ Friday **8040** 7 ☐ Saturday **8044** 8 ☐ Monday—Friday	**8014** x5 ☐ All days **8018** 1 ☐ Sunday **8022** 2 ☐ Monday **8026** 3 ☐ Tuesday **8030** 4 ☐ Wednesday **8034** 5 ☐ Thursday **8038** 6 ☐ Friday **8042** 7 ☐ Saturday **8046** 8 ☐ Monday—Friday
e. During that week, at what time of day did . . . begin work most days?	**8050** **8048** ☐☐ : ☐☐ (Time) { 1 ☐ a.m. 2 ☐ p.m.	**8054** **8052** ☐☐ : ☐☐ (Time) { 1 ☐ a.m. 2 ☐ p.m.
f. At what time of day did . . . end work most days?	**8058** **8056** ☐☐ : ☐☐ (Time) { 1 ☐ a.m. 2 ☐ p.m.	**8062** **8060** ☐☐ : ☐☐ (Time) { 1 ☐ a.m. 2 ☐ p.m.

NOTES

TOPICAL MODULES

Part A — WORK SCHEDULE (Continued)

1g. Which of the following best describes . . .'s work schedule at this job?	JOB 1	JOB 2
Read categories.	**8064** ₁☐ **Regular daytime schedule** ₂☐ **Regular evening shift** ₃☐ **Regular night shift** ₄☐ **Rotating shift (one that changes regularly from days to evenings or nights)** ₅☐ **Split shift (one consisting of two distinct periods each day)** ₆☐ **Irregular schedule (one that changes from day to day)** ₇☐ **Other** — *Specify* ⤵ _____ _____	**8066** ₁☐ **Regular daytime schedule** ₂☐ **Regular evening shift** ₃☐ **Regular night shift** ₄☐ **Rotating shift (one that changes regularly from days to evenings or nights)** ₅☐ **Split shift (one consisting of two distinct periods each day)** ₆☐ **Irregular schedule (one that changes from day to day)** ₇☐ **Other** — *Specify* ⤵ _____ _____
h. What is the MAIN reason . . . works *(Read shift description marked in item 1g)?*	Voluntary reasons **8068** ₁☐ Better child care arrangements ₂☐ Better pay ₃☐ Better arrangements for care of other family members ₄☐ Allows time for school ₅☐ Other voluntary reasons Involuntary reasons ₆☐ Could not get any other job ₇☐ Requirements of the job ₈☐ Other involuntary reasons	Voluntary reasons **8070** ₁☐ Better child care arrangements ₂☐ Better pay ₃☐ Better arrangements for care of other family members ₄☐ Allows time for school ₅☐ Other voluntary reasons Involuntary reasons ₆☐ Could not get any other job ₇☐ Requirements of the job ₈☐ Other involuntary reasons

NOTES

TOPICAL MODULES

Section 5 — TOPICAL MODULES (Continued)

Part B — CHILD CARE

CHECK ITEM T2	*Refer to cc items 27 and 24.* Is . . . the designated parent or guardian of children under 15 years of age who live in this household?	**8100** ₁☐ Yes ₂☐ No — *SKIP to Check Item T12, page 52*
CHECK ITEM T3	Is "Worked" (code 170) marked on the ISS?	**8102** ₁☐ Yes — *SKIP to Check Item T6* ₂☐ No
CHECK ITEM T4	*Refer to item 30a, page 12.* Was . . . enrolled in school during the reference period?	**8103** ₁☐ Yes ₂☐ No — *SKIP to Check Item T5*
1. About how many hours per week did . . . usually spend in school last month?		**8104** ☐☐ Hours OR x1☐ Hours varied x2☐ Don't know ⎬ *SKIP to Check Item T6* x3☐ Not enrolled last month
CHECK ITEM T5	*Refer to item 2a, page 2.* Did . . . spend any time looking for work or on layoff from a job during the reference period?	**8106** ₁☐ Yes ₂☐ No — *SKIP to Check Item T12, page 52*
2. About how many hours per week did . . . usually spend looking for a job last month?		**8108** ☐☐ Hours OR x1☐ Hours varied x2☐ Don't know x3☐ Did not look for a job last month — *SKIP to Check Item T12, page 52*

NOTES

Part B — CHILD CARE (Continued)

CHECK ITEM T6	YOUNGEST	SECOND YOUNGEST	THIRD YOUNGEST
Refer to cc items 18, 19, 24, and 27. Beginning with the youngest child enter person numbers, ages, and names of children under 15, who are household members, for whom the person is a parent or a guardian.	Person No. Age **8114** [| |] ___ Name _____	Person No. Age **8116** [| |] ___ Name _____	Person No. Age **8118** [| |] ___ Name _____

ASK 3a−4f for the youngest child and then read 3a−4f for the second and third youngest.

Now we have some questions about how the children in this household were cared for while ... was working (in school/looking for a job).	**8120**	**8122**	**8124**
3a. During (Last month), **what was** (Name of child) **usually doing or how was** (Name of child) **usually cared for during most of the hours that ... worked (was in school/was looking for a job)?** *Mark the arrangement in which the child spent the most hours in a typical week last month.* *Mark (X) only one box.*	1 □ Child's other parent/stepparent 2 □ Child's brother/sister 3 □ Child's grandparent 4 □ Other relative of child 5 □ Nonrelative of child 6 □ Child in day/ group care center 7 □ Child in nursery/ preschool 8 □ Child in organized school-based activity (before/after school) 9 □ Child in kindergarten, elementary or secondary school } *SKIP to Check Item T7* 10 □ Child cares for self 11 □ ... works at home 12 □ ... cares for child at work (in class/while job hunting) 13 □ Child not born and/or ... not guardian as of last month } *SKIP to next child or Check Item T12, page 52* 14 □ ... did not work, go to school, or look for job last month } *SKIP to 5c, page 51*	1 □ Child's other parent/stepparent 2 □ Child's brother/sister 3 □ Child's grandparent 4 □ Other relative of child 5 □ Nonrelative of child 6 □ Child in day/ group care center 7 □ Child in nursery/ preschool 8 □ Child in organized school-based activity (before/after school) 9 □ Child in kindergarten, elementary or secondary school } *SKIP to Check Item T7* 10 □ Child cares for self 11 □ ... works at home 12 □ ... cares for child at work (in class/while job hunting) 13 □ Child not born and/or ... not guardian as of last month } *SKIP to next child or Check Item T12, page 52*	1 □ Child's other parent/stepparent 2 □ Child's brother/sister 3 □ Child's grandparent 4 □ Other relative of child 5 □ Nonrelative of child 6 □ Child in day/ group care center 7 □ Child in nursery/ preschool 8 □ Child in organized school-based activity (before/after school) 9 □ Child in kindergarten, elementary or secondary school } *SKIP to Check Item T7* 10 □ Child cares for self 11 □ ... works at home 12 □ ... cares for child at work (in class/while job hunting) 13 □ Child not born and/or ... not guardian as of last month } *SKIP to next child or Check Item T12, page 52*
b. Was (Name of child) **usually cared for at his/her home, at someone else's home, or at some other place?**	**8126** 1 □ Child's home 2 □ Other private home 3 □ Other place	**8128** 1 □ Child's home 2 □ Other private home 3 □ Other place	**8130** 1 □ Child's home 2 □ Other private home 3 □ Other place
CHECK ITEM T7 Is box 3−8 marked in item 3a?	**8132** 1 □ Yes 2 □ No − *SKIP to 3f, page 50*	**8134** 1 □ Yes 2 □ No − *SKIP to 3f, page 50*	**8136** 1 □ Yes 2 □ No − *SKIP to 3f, page 50*
3c. Was any money payment usually made for this arrangement?	**8138** 1 □ Yes 2 □ No − *SKIP to 3f, page 50*	**8140** 1 □ Yes − *SKIP to 3d* 2 □ No − *SKIP to 3f, page 50*	**8142** 1 □ Yes − *SKIP to 3d* 2 □ No − *SKIP to 3f, page 50*
CHECK ITEM T8 Are there 2 or more children listed in Check Item T6?	**8144** 1 □ Yes 2 □ No − *SKIP to 3e*		
ASK OR VERIFY − **3d. Does ... (or ...'s family) pay for** (Name of child)'**s child care separately, or does the payment for the care you just described also cover some other child?**	**8146** 1 □ Payment for youngest child separately 2 □ Includes another child	**8148** 1 □ Payment for second youngest child separately 2 □ Includes another child	**8150** 1 □ Payment for third youngest child separately 2 □ Includes another child
ASK OR VERIFY − **e. In a typical week, how much did ... (or ...'s family) usually pay in this arrangement for** (Name of child)? (If payment includes money paid for another child, write in total amount for all children in first mentioned child's column. If dollar amount already recorded from previous child(ren) mark codes X2 or X3 as applicable.)	**8152** $ [____] . 00 Per week x1 □ DK	**8154** $ [____] . 00 Per week x1 □ DK Previously recorded for − x2 □ Youngest child	**8156** $ [____] . 00 Per week x1 □ DK Previously recorded for − x2 □ Youngest child x3 □ Second youngest

Part B — CHILD CARE (Continued)

	YOUNGEST	SECOND YOUNGEST	THIRD YOUNGEST
3f. About how many hours per week was *(Name of child)* usually cared for in the arrangement while . . . worked (was in school/was looking for a job) last month?	**8158** ☐☐ Hours	**8160** ☐☐ Hours	**8162** ☐☐ Hours
g. Was any other arrangement usually used for *(Name of child)* in a typical week last month?	**8164** 1☐ Yes 2☐ No – *SKIP to next child or Check Item T11*	**8166** 1☐ Yes 2☐ No – *SKIP to next child or Check Item T11*	**8168** 1☐ Yes 2☐ No – *SKIP to Check Item T11*
4a. What did *(Name of child)* do or how was *(Name of child)* cared for during most of the other hours that . . . worked (was in school/ was looking for a job)? *Mark the arrangement in which the child spent the second most hours in a typical week.* Mark (X) only one box.	**8170** 1☐ Child's other parent/stepparent 2☐ Child's brother/sister 3☐ Child's grandparent 4☐ Other relative of child 5☐ Nonrelative of child 6☐ Child in day/ group care center 7☐ Child in nursery/ preschool 8☐ Child in organized school-based activity (before/after school) 9☐ Child in kindergarten, elementary or secondary school 10☐ Child cares for self 11☐ . . . works at home 12☐ . . . cares for child at work (in class/while job hunting) ⎤ *SKIP to Check Item T9*	**8172** 1☐ Child's other parent/stepparent 2☐ Child's brother/sister 3☐ Child's grandparent 4☐ Other relative of child 5☐ Nonrelative of child 6☐ Child in day/ group care center 7☐ Child in nursery/ preschool 8☐ Child in organized school-based activity (before/after school) 9☐ Child in kindergarten, elementary or secondary school 10☐ Child cares for self 11☐ . . . works at home 12☐ . . . cares for child at work (in class/while job hunting) ⎤ *SKIP to Check Item T9*	**8174** 1☐ Child's other parent/stepparent 2☐ Child's brother/sister 3☐ Child's grandparent 4☐ Other relative of child 5☐ Nonrelative of child 6☐ Child in day/ group care center 7☐ Child in nursery/ preschool 8☐ Child in organized school-based activity (before/after school) 9☐ Child in kindergarten, elementary or secondary school 10☐ Child cares for self 11☐ . . . works at home 12☐ . . . cares for child at work (in class/while job hunting) ⎤ *SKIP to Check Item T9*
b. Was *(Name of child)* usually cared for at his/her home, at someone else's home, or at some other place?	**8176** 1☐ Child's home 2☐ Other private home 3☐ Other place	**8178** 1☐ Child's home 2☐ Other private home 3☐ Other place	**8180** 1☐ Child's home 2☐ Other private home 3☐ Other place
CHECK ITEM T9 Is box 3–8 marked in item 4a?	**8182** 1☐ Yes 2☐ No – *SKIP to 4f*	**8184** 1☐ Yes 2☐ No – *SKIP to 4f*	**8186** 1☐ Yes 2☐ No – *SKIP to 4f*
4c. Was any money payment usually made for this arrangement?	**8188** 1☐ Yes 2☐ No – *SKIP to 4f*	**8190** 1☐ Yes – *SKIP to 4d* 2☐ No – *SKIP to 4f*	**8192** 1☐ Yes – *SKIP to 4d* 2☐ No – *SKIP to 4f*
CHECK ITEM T10 Are there 2 or more children listed in Check Item T6?	**8194** 1☐ Yes 2☐ No – *SKIP to 4e*		
ASK OR VERIFY – **4d.** Does . . . (or . . .'s family) pay for *(Name of child)'s* child care separately, or does the payment for the care you just described also cover some other child?	**8196** 1☐ Payment for youngest child separately 2☐ Includes another child	**8198** 1☐ Payment for second youngest child separately 2☐ Includes another child	**8200** 1☐ Payment for third youngest child separately 2☐ Includes another child
ASK OR VERIFY – **e.** In a typical week, how much did . . . (or . . .'s family) usually pay in this arrangement for *(Name of child)?* *(If payment includes money paid for another child, write in total amount for all children in first mentioned child's column. If dollar amount already recorded from previous child(ren) mark codes X2 or X3 as applicable.)*	**8202** $ ☐☐☐ . 00 Per week x1☐ DK	**8204** $ ☐☐☐ . 00 Per week x1☐ DK Previously recorded for – x2☐ Youngest child	**8206** $ ☐☐☐ . 00 Per week x1☐ DK Previously recorded for – x2☐ Youngest child x3☐ Second youngest
f. About how many hours per week was *(Name of child)* usually cared for in the arrangement while . . . worked (was in school/was looking for a job)?	☐☐ Hours **8208** *SKIP to next child or Check Item T11*	☐☐ Hours **8210** *SKIP to next child or Check Item T11*	☐☐ Hours **8212** *SKIP to Check Item T11*

Part B — CHILD CARE (Continued)

CHECK ITEM T11	*Refer to cc items 27 and 24.* Is . . . the designated parent or guardian of 4 or more children under 15 years old who live in this household?	**8214** ₁ ☐ Yes ₂ ☐ No — *SKIP to 5b*

5a. Considering all of . . . 's children under 15 in the household, even those not previously mentioned, how much did . . . (or . . .'s family) pay for child care for all of . . .'s children for all arrangements used, in a typical week?

(Exclude cost of school tuition for kindergarten, elementary or secondary school.)

8216 $ [   ] . [00] per week

b. During *(last month),* **did . . . (or . . .'s spouse) lose any time from work (school/job hunting) because the person who usually took care of the child(ren) was not available?**

8218 ₁ ☐ Yes, respondent lost time
₂ ☐ Yes, spouse lost time
₃ ☐ Both respondent and spouse lost time
₄ ☐ No
x₁ ☐ Don't know

c. During the past 4 months, did . . . change any child care arrangements for any children under age 15?

(Include ONLY changes in child care providers or location of child care.)

8220 ₁ ☐ Yes
₂ ☐ No — *SKIP to Check Item T12, page 52*

d. For what reason(s) did this/these child care arrangement(s) change?

Mark (X) all that apply.

8222 ₁ ☐ Beginning/ending/changes in child's school enrollment
8224 ₂ ☐ Beginning/ending/changes in . . .'s job
8226 ₃ ☐ Beginning/ending/changes in . . .'s school enrollment
8228 ₄ ☐ Cost
8230 ₅ ☐ Availability or hours of care provider
8232 ₆ ☐ Reliability of care provider
8234 ₇ ☐ Quality of care provided
8236 ₈ ☐ Location or accessability to care provider
8238 ₉ ☐ Found better/less expensive/more convenient provider
8240 ₁₀ ☐ Never had any regular arrangement
8242 ₁₁ ☐ Other — *Specify* ↓

_____

Go to part C, page 52

NOTES

Section 5 — TOPICAL MODULES (Continued)

Part C — CHILD SUPPORT AGREEMENTS

CHECK ITEM T12	*Refer to cc items 24 and 25.* Is . . . the parent of children under 21 years of age who live in this household?	**8300** 1 ☐ Yes 2 ☐ No — *SKIP to part D, page 54*
CHECK ITEM T13	Is "Child Support Payments" (code 28) marked on the ISS?	**8302** 1 ☐ Yes — *SKIP to 2a* 2 ☐ No

1. These next few questions concern child support. Have child support payments ever been agreed to or awarded for (any of) . . .'s children living here?

8304   1 ☐ Yes
  2 ☐ No — *SKIP to 3a*

2a. The following questions relate to the most recent child support agreement. Was this agreement a court-ordered agreement, or some other type of agreement?

8306   1 ☐ Court-ordered agreement
  2 ☐ Other type of agreement — *Specify*

---

b. In what year was this agreement FIRST reached?

8308 | 1 | 9 | | |

c. Has the dollar amount ever been changed?

8310   1 ☐ Yes
  2 ☐ No — *SKIP to 2e*

d. In what year was the amount last changed?

8312 | 1 | 9 | | |

e. How were the payments to be received? Were they — *(Read categories)*?

8314   1 ☐ **Directly from the other parent?**
  2 ☐ **Through a court?**
  3 ☐ **Through the welfare agency?**
  4 ☐ **Some other method?**

ASK OR VERIFY —

f. Is . . . still supposed to receive child support payments?

8316   1 ☐ Yes — *SKIP to 2h*
  2 ☐ No

g. Why not?

8318   1 ☐ Child(ren) over the age limit
  2 ☐ Other parent deceased
  3 ☐ Other parent not working
  4 ☐ Other — *Specify*   } *SKIP to 2l*

h. How regularly are the child support payments received — would you say regularly, occasionally, seldom, or never?

  1 ☐ Regularly
  2 ☐ Occasionally
  3 ☐ Seldom
8320   4 ☐ Never

i. What is the total amount that . . . was supposed to have received in child support payments during the past 12 months (from the most recent child support agreement)?

8322 $ [ ] . | 00 |

OR

x1 ☐ DK

j. What is the total amount that . . . actually received in child support payments under that agreement, during the past 12 months?

8324 $ [ ] . | 00 |

OR

x3 ☐ None

OR

x1 ☐ DK

2k. Which children living here were covered by that agreement?

`8326` x3 ☐ None
x5 ☐ All
OR
Person No.   Name

`8328` [☐☐☐] _____

`8330` [☐☐☐] _____

`8332` [☐☐☐] _____

ℓ. What child custody arrangements did that agreement specify?

`8334`
1 ☐ Visitation arrangements with the other parent
2 ☐ Shared living arrangements
3 ☐ Other arrangements — *Specify*

_____

4 ☐ No custody arrangements specified in the agreement

ASK OR VERIFY —
m. Does . . . know the current address of the other parent?

`8336`
1 ☐ Yes
2 ☐ No
3 ☐ Other parent deceased — *SKIP to 2p*

n. Does the other parent now live in this state?

`8338`
1 ☐ Yes
2 ☐ No   } *SKIP to 2p*
x1 ☐ Don't know

o. Does the other parent now live in this city or county?

`8340`
1 ☐ Yes
2 ☐ No
x1 ☐ Don't know

CHECK ITEM T14 *Refer to cc items 24 and 25.* Does . . . have more than one child under 21 years of age who lives in this household?

`8342`
1 ☐ Yes
2 ☐ No — *SKIP to 3a*

2p. (Other than the support agreement/payments discussed above), were any of . . .'s children in this household covered by another child support agreement?

`8344`
1 ☐ Yes
2 ☐ No

3a. Has . . . ever contacted a public agency (such as the child support enforcement office) for aid in obtaining child support?

`8346`
1 ☐ Yes
2 ☐ No — *SKIP to part D, page 54*

b. In what year did . . . last contact that agency?

`8348` [1 | 9 | ☐ | ☐]

c. What type of help did . . . need (most recently)?

Mark (X) all that apply.

`8350` 1 ☐ Locate the other parent
`8352` 2 ☐ Establish paternity/maternity
`8354` 3 ☐ Establish support obligation
`8356` 4 ☐ Enforce support order
`8358` 5 ☐ Obtain collection
`8360` 6 ☐ Other — *Specify*

_____

d. Did . . . receive any help from that agency?

`8362`
1 ☐ Yes
2 ☐ No — *SKIP to part D, page 54*

e. What kind of help did . . . receive (most recently)?

Mark (X) all that apply.

`8364` 1 ☐ Locate the other parent
`8366` 2 ☐ Establish paternity/maternity
`8368` 3 ☐ Establish support obligation
`8370` 4 ☐ Enforce support order
`8372` 5 ☐ Obtain collection
`8374` 6 ☐ Other — *Specify*

_____

Go to part D

Section 5 — TOPICAL MODULES (Continued)

Part D — SUPPORT FOR NONHOUSEHOLD MEMBERS

1. During the past 12 months, did . . . make any regular or lump-sum payments for the support of someone who did not live in . . .'s household?

(Include alimony or child support; do not include payments for a child who is away at school but who is considered part of the household. Do not include payments already reported by another household member.)

8400
- 1 ☐ Yes
- 2 ☐ No — *SKIP to Check Item T16, page 55*

2. Did . . . make regular payments, lump-sum payments, or both?

8402
- 1 ☐ Regular
- 2 ☐ Lump-sum
- 3 ☐ Both

3a. Were any of these payments for the support of . . .'s child or children under 21 years of age?

8404
- 1 ☐ Yes
- 2 ☐ No ⎫
- x1 ☐ DK ⎬ *SKIP to 5b*

b. For how many children did . . . make support payments?

8406 ☐☐ Children
- x1 ☐ DK

c. Were any of these payments the result of a court-order or some other kind of written agreement?

8408
- 1 ☐ Yes
- 2 ☐ No — *SKIP to 4c*

d. Was this/these agreement(s) a court-ordered agreement or some other type of agreement?

Mark (X) all that apply.

8410 1 ☐ Court-order

8412 2 ☐ Other agreement — *Specify*
_____

These next few questions relate to the most recent court-ordered and/or written child support agreement for . . .'s child(ren).

3e. In what year was this agreement FIRST reached?

8414 ☐1☐ ☐9☐ ☐☐

f. Has the dollar amount ever been changed?

8416
- 1 ☐ Yes
- 2 ☐ No — *SKIP to 3h*

g. In what year was the amount last changed?

8418 ☐1☐ ☐9☐ ☐☐

h. Is . . . still supposed to pay child support?

8420
- 1 ☐ Yes
- 2 ☐ No

i. How much did . . . pay in child support under this agreement during the past 12 months?

8422 $ _____ . 00
- x1 ☐ DK

j. Were these payments made by withholding money from . . .'s paycheck?

8424
- 1 ☐ Yes
- 2 ☐ No

4a. (Other than the most recent support agreement/payments discussed above), were any of . . .'s other children outside of this household under age 21 covered by any other court-ordered and/or written child support agreement?

8426
- 1 ☐ Yes
- 2 ☐ No — *SKIP to 4c*

b. How much did . . . pay in child support for this/these arrangement(s) during the past 12 months?

8428 $ _____ . 00
- x1 ☐ DK

c. (Other than the agreement discussed above) were any child support payments made without a written child support agreement for . . .'s children under age 21?

8430
- 1 ☐ Yes
- 2 ☐ No — *SKIP to 5a*

d. How much did . . . pay for child support under this arrangement during the past 12 months?

8432 $ _____ . 00
- x1 ☐ DK

5a. During the past 12 months, did . . . make regular payments for the support of any other person not living in . . .'s household?

`8434`
1 ☐ Yes
2 ☐ No — *SKIP to Check Item T16*

b. For how many (other) persons did . . . make support payments?

`8436` ☐☐ Persons
x1 ☐ DK

ASK 5c—5e FOR THE FIRST TWO PERSONS MENTIONED.	FIRST PERSON	SECOND PERSON
c. How is this person related to . . .? *Mark (X) only one box.*	`8438` 1 ☐ Parent 2 ☐ Spouse 3 ☐ Ex-spouse 4 ☐ Child under 21 5 ☐ Child 21 or older 6 ☐ Other relative 7 ☐ Nonrelative	`8440` 1 ☐ Parent 2 ☐ Spouse 3 ☐ Ex-spouse 4 ☐ Child under 21 5 ☐ Child 21 or older 6 ☐ Other relative 7 ☐ Nonrelative
d. Where was this person living during most of the past 12 months? Was it in a private home or apartment, a nursing home, or someplace else?	`8442` 1 ☐ Private home or apartment 2 ☐ Nursing home 3 ☐ Someplace else	`8444` 1 ☐ Private home or apartment 2 ☐ Nursing home 3 ☐ Someplace else
e. How much did . . . pay for the support of this person during the past 12 months?	`8446` $ ☐ . 00 x1 ☐ DK	`8448` $ ☐ . 00 x1 ☐ DK

CHECK ITEM T15 — Is the entry in item 5b "03" or more?

`8450`
1 ☐ Yes
2 ☐ No — *SKIP to Check Item T16*

6. How much did . . . pay during the past 12 months for the support of the other persons that we have not talked about already?

`8452` $ ☐ . 00
x1 ☐ DK

CHECK ITEM T16 — *Refer to item 27g, page 10.* Did . . . have a family plan health insurance policy?

`8454`
1 ☐ Yes
2 ☐ No — *SKIP to part E, page 56*

7a. We recorded earlier that . . . had a family plan health insurance policy. Did that policy cover anybody who did not live in . . .'s household?

`8456`
1 ☐ Yes
2 ☐ No — *SKIP to part E, page 56*

b. How many persons outside of . . .'s household were covered by . . .'s policy?

`8458` ☐☐ Number
x1 ☐ DK

c. How were these persons related to . . .?
 Mark (X) all that apply.

`8460` 1 ☐ Child(ren)
`8462` 2 ☐ Spouse
`8464` 3 ☐ Other — *Specify* ↓
_____

Go to part E, page 56

NOTES

Section 5 — TOPICAL MODULES (Continued)

Part E — LONG-TERM CARE

1. Were there times in the past month when . . . needed help with things like personal care, housework, preparing meals, or getting to the store or doctor because . . . had a health problem or condition?

`8500`
- ₁ ☐ Yes
- ₂ ☐ No — *SKIP to Statement B, page 58*

2. Did . . . need help because of a health condition that has lasted or will last 3 months or longer?

`8502`
- ₁ ☐ Yes
- ₂ ☐ No — *SKIP to Statement B, page 58*

3a. Did . . . need help from others in looking after personal needs such as dressing, undressing, eating, or personal hygiene?

`8504`
- ₁ ☐ Yes
- ₂ ☐ No — *SKIP to 4a*

b. Who helped . . . with such things?
Anyone else?

(Mark up to two helpers; one in each column. If only one helper, mark first column.)

FIRST HELPER	SECOND HELPER
RELATIVE `8506`	RELATIVE `8508`
₁ ☐ Son	₁ ☐ Son
₂ ☐ Daughter	₂ ☐ Daughter
₃ ☐ Spouse	₃ ☐ Spouse
₄ ☐ Parent	₄ ☐ Parent
₅ ☐ Other relative	₅ ☐ Other relative
NONRELATIVE	NONRELATIVE
₆ ☐ Friend or neighbor	₆ ☐ Friend or neighbor
₇ ☐ Paid help	₇ ☐ Paid help
₈ ☐ Other nonrelative	₈ ☐ Other nonrelative
₉ ☐ Did not receive help	₉ ☐ Did not receive help

ASK OR VERIFY —

c. Is *(Person mentioned above)* a household member?

FIRST HELPER	SECOND HELPER
`8510` ₁ ☐ Yes⤵	`8512` ₁ ☐ Yes⤵
Person number	Person number
`8514` ☐☐☐	`8516` ☐☐☐
`8518` ₂ ☐ No	`8520` ₂ ☐ No

4a. Because of . . .'s health, did . . . need help with housework such as washing dishes, straightening up, or light cleaning?

`8522`
- ₁ ☐ Yes
- ₂ ☐ No — *SKIP to 5a*

b. Who helped . . . with such things?
Anyone else?

(Mark up to two helpers; one in each column. If only one helper, mark first column.)

FIRST HELPER	SECOND HELPER
RELATIVE `8524`	RELATIVE `8526`
₁ ☐ Son	₁ ☐ Son
₂ ☐ Daughter	₂ ☐ Daughter
₃ ☐ Spouse	₃ ☐ Spouse
₄ ☐ Parent	₄ ☐ Parent
₅ ☐ Other relative	₅ ☐ Other relative
NONRELATIVE	NONRELATIVE
₆ ☐ Friend or neighbor	₆ ☐ Friend or neighbor
₇ ☐ Paid help	₇ ☐ Paid help
₈ ☐ Other nonrelative	₈ ☐ Other nonrelative
₉ ☐ Did not receive help	₉ ☐ Did not receive help

ASK OR VERIFY —

c. Is *(Person mentioned above)* a household member?

FIRST HELPER	SECOND HELPER
`8528` ₁ ☐ Yes⤵	`8530` ₁ ☐ Yes⤵
Person number	Person number
`8532` ☐☐☐	`8534` ☐☐☐
`8536` ₂ ☐ No	`8538` ₂ ☐ No

Part E — LONG-TERM CARE (Continued)

5a. Because of . . .'s health or condition, did . . . need help to prepare meals?

`8540`
1 ☐ Yes
2 ☐ No — *SKIP to 6a*

b. Who helped . . . with such things?

Anyone else?

*(Mark up to two helpers; **one** in each column. If only one helper, mark first column.)*

	FIRST HELPER	SECOND HELPER
	RELATIVE	RELATIVE
	`8542` 1 ☐ Son	`8544` 1 ☐ Son
	2 ☐ Daughter	2 ☐ Daughter
	3 ☐ Spouse	3 ☐ Spouse
	4 ☐ Parent	4 ☐ Parent
	5 ☐ Other relative	5 ☐ Other relative
	NONRELATIVE	NONRELATIVE
	6 ☐ Friend or neighbor	6 ☐ Friend or neighbor
	7 ☐ Paid help	7 ☐ Paid help
	8 ☐ Other nonrelative	8 ☐ Other nonrelative
	9 ☐ Did not receive help	9 ☐ Did not receive help

ASK OR VERIFY —

c. Is *(Person mentioned above)* **a household member?**

	FIRST HELPER	SECOND HELPER
	`8546` 1 ☐ Yes	`8548` 1 ☐ Yes
	Person number	Person number
	`8550` ☐☐☐	`8552` ☐☐☐
	`8554` 2 ☐ No	`8556` 2 ☐ No

d. During the past 4 months, did . . . receive any meals provided by a community service, either delivered to the home or served in a group setting?

`8558`
1 ☐ Yes
2 ☐ No — *SKIP to 6a*

e. How many meals a week did . . . usually receive?

`8560` ☐☐

x1 ☐ DK

6a. Did . . . need help from another person in order to get around outside the house?

`8562`
1 ☐ Unable to leave the house — *SKIP to 7a*
2 ☐ Yes
3 ☐ No — *SKIP to 7a*

b. Who helped . . . with such things?

Anyone else?

*(Mark up to two helpers; **one** in each column. If only one helper, mark first column.)*

	FIRST HELPER	SECOND HELPER
	RELATIVE	RELATIVE
	`8564` 1 ☐ Son	`8566` 1 ☐ Son
	2 ☐ Daughter	2 ☐ Daughter
	3 ☐ Spouse	3 ☐ Spouse
	4 ☐ Parent	4 ☐ Parent
	5 ☐ Other relative	5 ☐ Other relative
	NONRELATIVE	NONRELATIVE
	6 ☐ Friend or neighbor	6 ☐ Friend or neighbor
	7 ☐ Paid help	7 ☐ Paid help
	8 ☐ Other nonrelative	8 ☐ Other nonrelative
	9 ☐ Did not receive help	9 ☐ Did not receive help

ASK OR VERIFY —

c. Is *(Person mentioned above)* **a household member?**

	FIRST HELPER	SECOND HELPER
	`8568` 1 ☐ Yes	`8570` 1 ☐ Yes
	Person number	Person number
	`8572` ☐☐☐	`8574` ☐☐☐
	`8576` 2 ☐ No	`8578` 2 ☐ No

7a. (Because of . . .'s health or condition) did . . . need the help of another person for keeping track of money and bills?

`8580`
- 1 ☐ Yes
- 2 ☐ No — SKIP to 8a

---

b. Who helped . . . with such things?

Anybody else?

(Mark up to two helpers; one in each column. If only one helper, mark first column.)

FIRST HELPER	SECOND HELPER
RELATIVE	**RELATIVE**
`8582` 1 ☐ Son	`8584` 1 ☐ Son
2 ☐ Daughter	2 ☐ Daughter
3 ☐ Spouse	3 ☐ Spouse
4 ☐ Parent	4 ☐ Parent
5 ☐ Other relative	5 ☐ Other relative
NONRELATIVE	**NONRELATIVE**
6 ☐ Friend or neighbor	6 ☐ Friend or neighbor
7 ☐ Paid help	7 ☐ Paid help
8 ☐ Other nonrelative	8 ☐ Other nonrelative
9 ☐ Did not receive help	9 ☐ Did not receive help

ASK OR VERIFY —

c. Is (Person mentioned above) a household member?

FIRST HELPER	SECOND HELPER
`8586` 1 ☐ Yes	`8588` 1 ☐ Yes
Person number	Person number
`8590` ☐☐☐	`8592` ☐☐☐
`8594` 2 ☐ No	`8596` 2 ☐ No

ASK OR VERIFY —

8a. During the past month, did . . . (or . . .'s family) pay for any of the help that . . . received?

`8598`
- 1 ☐ Yes
- 2 ☐ No ⎫
- x1 ☐ DK ⎬ SKIP to Check Item T17

---

b. How much was paid for such help during (Read last month)?

`8600` $ [_____] [00]

x1 ☐ DK

CHECK ITEM T17

Refer to item 6a, page 57.
Was . . . unable to leave the house or did . . . need help to get around outside the house?

`8602`
- 1 ☐ Yes — SKIP to Check Item T18, page 60
- 2 ☐ No

► STATEMENT B These next few questions concern helping persons with a health problem or condition with personal care, housework, meal preparation, shopping, or getting around outside the home.

9a. During the past month, did . . . give this kind of help to anyone outside of . . .'s household? (Exclude professional care givers who are paid for this assistance.)

`8604`
- 1 ☐ Yes
- 2 ☐ No — SKIP to Check Item T18, page 60

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b. How many persons did . . . help in this way?

`8606`
- 1 ☐ One
- 2 ☐ Two
- 3 ☐ Three or more

NOTES

Part E — LONG-TERM CARE (Continued)

9c. How was (were) this person (these people) related to . . .?

FIRST PERSON HELPED

`8608`
- 1 ☐ Parent
- 2 ☐ Brother/sister
- 3 ☐ Child
- 4 ☐ Grandparent
- 5 ☐ Other relative
- 6 ☐ Not a relative

SECOND PERSON HELPED

`8610`
- 1 ☐ Parent
- 2 ☐ Brother/sister
- 3 ☐ Child
- 4 ☐ Grandparent
- 5 ☐ Other relative
- 6 ☐ Not a relative

THIRD PERSON HELPED

`8612`
- 1 ☐ Parent
- 2 ☐ Brother/sister
- 3 ☐ Child
- 4 ☐ Grandparent
- 5 ☐ Other relative
- 6 ☐ Not a relative

10. During the last month, did . . . give any of the following kinds of help?

	YES	NO
a. Help someone dress, eat, bathe, or get to the bathroom? `8614`	1 ☐	2 ☐
b. Help someone with housework such as washing dishes, straightening up, or light cleaning? `8616`	1 ☐	2 ☐
c. Prepare a meal? `8618`	1 ☐	2 ☐
d. Take someone shopping, to a doctor, or somewhere else outside the home? `8620`	1 ☐	2 ☐
e. Help someone by keeping track of their money or bills? `8622`	1 ☐	2 ☐

11. During the past month, about how many days were there when . . . gave personal care help to someone?

`8624` ☐☐ Days

x1 ☐ DK

12. During the past month, about how many hours a week did . . . spend providing personal care help?

(Enter "99" if 100 or greater.)

`8626` ☐☐ Hours

x1 ☐ DK

Go to part F, page 60

NOTES

Section 5 — TOPICAL MODULES (Continued)

Part F — DISABILITY STATUS OF CHILDREN

CHECK ITEM T18 *Refer to cc item 27.* Is . . . the designated parent or guardian of children under 18 years old who live in this household?	`8700` 1 ☐ Yes 2 ☐ No — *SKIP to part G*

1a. Do any of . . .'s children (under 18) in this household have a long lasting physical, mental, or emotional condition which limits their ability to walk, run, or play?

`8702`
1 ☐ Yes
2 ☐ No — *SKIP to 2a*

b. Which children?

Enter children by age, oldest first.

Person No. `8704` ☐☐☐ Name _____	Person No. `8706` ☐☐☐ Name _____	Person No. `8708` ☐☐☐ Name _____

(SHOW FLASHCARD II)

c. What health condition is the main reason *(Name of child)* has this difficulty?

`8710` Code ☐☐ Name of condition _____	`8712` Code ☐☐ Name of condition _____	`8714` Code ☐☐ Name of condition _____

d. Would you say *(Name of child)*'s limitation is severe, moderate, or minor?

`8716` 1 ☐ Severe 2 ☐ Moderate 3 ☐ Minor	`8718` 1 ☐ Severe 2 ☐ Moderate 3 ☐ Minor	`8720` 1 ☐ Severe 2 ☐ Moderate 3 ☐ Minor

2a. Do any of . . .'s children (under 18) in this household have a long lasting physical, mental, or emotional condition which limits their ability to learn or do regular school work?

`8722`
1 ☐ Yes
2 ☐ No — *SKIP to part G*

b. Which children?

Enter children by age, oldest first.

Person No. `8724` ☐☐☐ Name _____	Person No. `8726` ☐☐☐ Name _____	Person No. `8728` ☐☐☐ Name _____

(SHOW FLASHCARD II)

c. What health condition is the main reason *(Name of child)* has this difficulty?

`8730` Code ☐☐ Name of condition _____	`8732` Code ☐☐ Name of condition _____	`8734` Code ☐☐ Name of condition _____

d. Would you say *(Name of child)*'s limitation is severe, moderate, or minor?

`8736` 1 ☐ Severe 2 ☐ Moderate 3 ☐ Minor	`8738` 1 ☐ Severe 2 ☐ Moderate 3 ☐ Minor	`8740` 1 ☐ Severe 2 ☐ Moderate 3 ☐ Minor

Go to part G, page 61

NOTES

Section 5 — TOPICAL MODULES (Continued)

Part G — HEALTH STATUS AND UTILIZATION OF HEALTH CARE SERVICES

These next few questions are about . . .'s health.

1. Would you say . . .'s health in general is excellent, very good, good, fair, or poor?

| 8816 |
1 ☐ Excellent
2 ☐ Very good
3 ☐ Good
4 ☐ Fair
5 ☐ Poor

2a. During the past 12 months, was . . . a patient in a hospital overnight or longer?

| 8818 |
1 ☐ Yes
2 ☐ No — *SKIP to 3*

b. How many different times did . . . stay in a hospital overnight or longer during the past 12 months?

| 8820 | ☐☐ Times
x1 ☐ DK

c. What was the reason for . . .'s last hospital stay?

Mark (X) all that apply.

| 8821 | 1 ☐ Child birth
| 8822 | 2 ☐ Surgery or operation (including bone setting or getting stitches)
| 8823 | 3 ☐ Other medical

d. Was . . . a patient in a VA or military hospital during (this visit/any of these visits)?

| 8824 |
1 ☐ Yes, military
2 ☐ Yes, VA
3 ☐ Yes, both military and VA
4 ☐ No

e. How many nights in all did . . . spend in a hospital during the past 12 months?

| 8825 | ☐☐☐ Nights
x1 ☐ DK

f. How many of these nights were in the past 4 months?

| 8826 | x5 ☐ All nights
OR
☐☐☐ Nights
OR
x1 ☐ DK
x3 ☐ None

3. During the past 4 months, about how many days did illness or injury keep . . . in bed more than half of the day? (Include days while an overnight patient in a hospital.)

| 8828 | x5 ☐ All days
OR
☐☐☐ Days
OR
x1 ☐ DK
x3 ☐ None

4a. During the past 12 months, how many times did . . . see or talk to a medical doctor or assistant? (Do not count occurrences while an overnight patient in a hospital.)

| 8830 | ☐☐ Times
OR
x1 ☐ DK ⎫
x3 ☐ None ⎭ *SKIP to 5a*

b. How many of these visits or calls were in the past 4 months?

| 8832 | ☐☐ Times
OR
x1 ☐ DK
x3 ☐ None

5a. Is there a particular clinic, health center, doctor's office, or some other place where . . . usually goes if . . . is sick or needs advice about . . .'s health?

| 8834 |
1 ☐ Yes
2 ☐ No — *SKIP to Check Item T19*

5b. To what kind of place does . . . usually go?

Mark (X) only one.

`8836`

1 ☐ Doctor's office (or HMO)
2 ☐ VA hospital
3 ☐ Military hospital
4 ☐ Hospital outpatient clinic (not VA or military)
5 ☐ Hospital emergency room
6 ☐ Company or industry clinic
7 ☐ Health center (neighborhood health center or free or low-cost clinic)
8 ☐ Other — *Specify*⤵

CHECK ITEM T19

Refer to item 27a and 27b, page 10.

Is . . . covered by a private health insurance plan?

`8838`

1 ☐ Yes — *SKIP to Check Item C1*
2 ☐ No

CHECK ITEM T20

Is "Medicare" (code 172) or "Medicaid" (code 173) marked on the ISS?

`8840`

1 ☐ Yes — *SKIP to Check Item C1*
2 ☐ No

---

6. I have recorded that . . . is not covered by a health insurance plan. Is that correct?

`8842`

1 ☐ Correct
2 ☐ Incorrect — covered by some other plan — *SKIP to Check Item C1*

(SHOW FLASHCARD JJ)

7. Which answer on this card best describes why . . . is not covered by health insurance?

Mark (X) only one.

`8844`

1 ☐ Job layoff, job loss, or any reasons related to unemployment
2 ☐ Employer does not offer health insurance
3 ☐ Can't obtain health insurance because of poor health, illness, or age
4 ☐ Too expensive; can't afford health insurance
5 ☐ Dissatisfied with previous health insurance
6 ☐ Don't believe in health insurance
7 ☐ Have been healthy; not much sickness in the family; haven't needed health insurance
8 ☐ Able to go to VA or military hospital for medical care
9 ☐ Covered by some other health plan
10 ☐ Other — *Specify*⤵

NOTES

CALLBACK SUMMARY